

To apply for a propane consumer rebate, please fill in all applicable information and attach a copy of required supporting documentation (well-documented work order, Gas Appliance Check or Propane Safety Check form). If assigning rebate to dealer, attach Dealer Assignment Form. Any omissions and/or errors will delay the rebate process. Limited funds available on a first-come, first-served basis. Call 800-64-CLEAR for fund availability.

Please check type of reba		tric Replacement	Your application must be	
It is your responsibility to make sure your application has bee filed on time.			postmarked within 30 days of the date the gas is turned on.	
WATER HEATER IN	IFORMATION - Please	Print or Type		
NEW PROPANE WATER H	EATER INFORMATION:			
New Propane Brand:	Model Number :	Serial No.:	Date Gas Turned On:	
New Propane Brand:	Model Number:	Serial No.:	Date Gas Turned On:	
ELECTRIC WATER HEATE	R, EXISTING INFORMATION:			
Old Brand:	Model Number:	Serial No.:		
APPLICANT INFOR	MATION - Please Print	or Tyne		
Applicant Name	marron ricase rime		cation (Must be Physical Location), Street / City / State / Zip:	
Mailing Address (If different):		City/State/Zip:	City/State/Zip:	
performance with respect to years. I consent to the on-sit	energy conservation, energy eff te examination of the above inst lled in compliance with the requ	iciency or air quality. I further ag allation by an employee, inspec	tion in any way that would materially impair the equipment's gree not to remove the installation from service for five tor or agent of the Commission for the purpose of verifying applicable RRC LP-gas safety rules, and remains in	
			Daytime Phone:	
Applicant Signature: Date:				
Applicant E-mail Address: (Must be provided if you wish to be notified when we have received your application.)			Social Security Number: Only applicants receiving more than \$800 need to provide their Social Security number:	
FOR BUILDERS ONLY:	SPEC HOME: YES	NO СОММ И	NITY PROPANE SYSTEM: YES NO	
PLEASE CHECK ONE: LIMITED PARTNERSHIP	TEXAS CORPORATION	☐ SOLE PROPRIETOR	Business/Tax ID # : File or Charter # :	
system may cause injury, harm, o	or loss. Contact a person licensed o	r registered to install, modify, or repa	is not licensed or registered to install, modify, or repair an LPG ir an LPG system. A person licensed to install or repair an LPG son except as otherwise provided by applicable law.	
FOR RRC USE ONL	Υ			
TRK#:	Date:	Initial:	Verified by:	
			CD 1	

PROPANE COMPANY INFORMATION - Please Print or Type					
Licensed Company Name :		RRC License Number:			
Address:					
City / State / Zip:		Daytime Phone :			
Pursuant to Texas Administrative Code 16 TAC §15.101, et seq., I understand and agree to all rules and conditions for participation in the Commission's propane consumer rebate program. I acknowledge that the equipment installed at this location is eligible for a rebate and that the installation meets all Railroad Commission rules and regulations. I hereby declare that I am authorized to sign this application, and that the information stated herein is true, correct, and complete to the best of my knowledge. I understand that as a Category E licensee, active company representative on file with the LP Gas Operations Section of the Alternative Energy Division, I am responsible for ensuring that safety inspections performed by the company's representatives comply with RRC rebate program requirements, and that by signing a rebate program application I am affirming that the installation passed the safety inspection as defined in 15.105 and required in 15.120(3) of the Rebate Program Rules.					
Signature of Company Representative Performing Safety Inspection:	Date of I	Date of Inspection:			
Printed Name of Company Representative Performing Safety Inspection:					
Signature of Category E licensee, active company representative on file with the LP Gas Operations Section of the Alternative Energy Division (below):					
Signature:		Date:			
NEW: Added Summer 2009: To help you keep better track of your applications on file please provide your e-mail address and we will notify you via e-mail when we receive your application. It continues to be the responsibility of the propane company and/or the applicant to verify your application has been received timely.					
Primary e-mail address: Alternate e-r		s:			

APPLICATIONS MAY EITHER BE FAXED, E-MAILED OR MAILED VIA UNITED STATES POSTAL SERVICE:

If you need any assistance filling out this application or have any questions, please feel free to contact our rebate section at 800-64-CLEAR.

FAX TO: 512-936-4196 or

E-MAIL TO: REBATES@RRC.STATE.TX.US OR

MAIL TO:

Railroad Commission of Texas Alternative Energy Division P.O. Box 12967 Austin, TX 78711-2967